

State Health Benefit Plan 2010 Open Enrollment Presentation for Active Employees and Pre 65 retirees

For Plan Year January 1– December 2010



Presented by State Health Benefit Plan

The DCH Mission is in Our Hands

ACCESS



Access
to affordable,
quality health
care in our
communities

RESPONSIBLE



Responsible
health planning
and use of
health care
resources

HEALTHY



Healthy
behaviors and
improved
health
outcomes



GEORGIA DEPARTMENT OF
COMMUNITY HEALTH

DCH Initiatives

FY 2008 and FY 2009

FY 2008

Medicaid Transformation

**Integrity of our Programs &
Safety Net**

Consumerism

**Health Improvement &
Resolving Disparities**

**Uninsured: Community
Solutions**

FY 2009

Medicaid Transformation

Health Care Consumerism

Financial Integrity

Health Improvement

Solutions for the Uninsured

Medicaid Program Integrity

Workforce Development

**PeachCare for Kids™ Program
Stability**

SHBP Evolution

**Customer Service and
Communication**



SHBP 2010 Open Enrollment

- SHBP Consumerism Strategy
- Plan Options
- Benefit/Premium Changes
- Things to Consider
- Open Enrollment

SHBP Options for Active Members

January 1, 2010

CIGNA and United HealthCare (UHC) will each offer:

- Health Reimbursement Arrangement (HRA)
- High Deductible Health Plan (HDHP)
- Open Access Plans (OAP): CIGNA Open Access Plus and United Choice Plus (in place of the PPO)
- Health Maintenance Organization (HMO)

SHBP Plan Options-Defined

What is a

- **Health Reimbursement Arrangement (HRA)** – consumer-driven health option that allows you flexibility in how you spend your health care dollars. SHBP also puts dollars in your account each year that cover first dollar out-of-pocket expenses and reduce your deductible and out-of-pocket maximum
- **High Deductible Health Plan (HDHP)** – consumer-driven health option that has a high deductible and a low premium and allows you to open a Health Saving Account (HSA) to set aside funds for future medical expenses
- **Open Access Plans (OAP) Open Access Plus (CIGNA) and Choice Plus (UHC)** provides coverage for services received by providers participating in-network and out-of-network, similar to a PPO
- **Health Maintenance Organization (HMO)** - provides coverage only when services are performed by a participating provider, except in the case of an emergency (as determined by the plan)



SHBP Changes – Kaiser Members

- Effective January 1, 2010, Kaiser Permanente will no longer be offered
- Kaiser members will need to make a selection for a new option during the 2010 Open Enrollment (OE)/Retiree Option Change Period (ROCP)
- Kaiser members with HMO coverage who do not select another option during OE will automatically be enrolled in the CIGNA HRA option and the tobacco and spousal (if your spouse is covered) surcharges will apply (to active members only)
- The SHBP options that Kaiser members can select from provide extensive benefits, and most of the Kaiser community specialists are participating in one or more of these options

SHBP Changes

Transition of Care for Kaiser Members

- Transition of care may be received if treatment for certain conditions is needed after December 31, 2009. To request transition of care, you should contact Customer Service of the health plan you have selected in early December but no later than December 31, 2009. You may reach the vendors at:

CIGNA:

HRA,OAP, HMO,HDHP-800-633-8519

UnitedHealthcare:

HRA- 800-396-6515

OAP,HMO,HDHP-877-246-4189

- If your Kaiser provider is a community specialist and is covered by the new plan you select, covered medical services will be covered under the new Plan effective January 1, 2010
- If you have any medical or pharmacy claims for services on or before December 31, 2009, these claims should be filed with Kaiser Permanente by June 30, 2010 at the following address: Kaiser Permanente, Claims Administration, P. O. Box 190849, Atlanta, GA 31119-0849



GEORGIA DEPARTMENT OF
COMMUNITY HEALTH

State of Georgia Update

Georgia's unprecedented fiscal challenges require some benefit changes and premium increases in 2010. These changes are necessary because of the shortfalls in state revenue normally used to fund the benefits program and keep pace with health care growth. SHBP's long-term strategy remains consumerism and improved health outcomes, and we have been able to preserve the features of the benefit program that highlight the importance of wellness and taking care of your health.

SHBP Plan Changes January 1, 2010

There are a number of changes to the State Health Benefit Plans as follows:

- There will be an increase in premiums of 10 percent for all options except the Medicare Advantage options

Active Employees:

- Tobacco Surcharge will increase from \$40 to \$60
- Spousal Surcharge will increase from \$30 to \$40

SHBP Plan Changes January 1, 2010

Active Employees

HMO Plan Changes											
Coverage	Deductible From To		Out of Pocket Max. From To		Coinsurance From To		Office Visit Copay From To		ER Room From To		Prescription Drugs From To
EE	\$400	\$ 600	\$1500	\$2000	10%	20%	\$30	\$35	\$100	\$150	\$10/30/75 \$15/40/75 (3 co-pays for 90-day supply)
EE + CH	\$600	\$ 900	\$2250	\$3000							
EE + SP	\$600	\$ 900	\$2250	\$3000							
EE+CH+SP	\$800	\$1200	\$3000	\$4000							

OAP Plan Changes (previously called the PPO option)											
Coverage	Deductible From To		Out of Pocket Max From To		Coinsurance From To		Office Visit Copay From To		ER Room From To		Prescription Drugs From To
EE	\$ 500	\$ 600	\$1500	\$2000	10%	20%	\$30	\$35	\$100	\$150	\$10/30/100 \$15/40/100
EE + CH	\$1000	\$1200	\$2250	\$3000							
EE + SP	\$1000	\$1200	\$2250	\$3000							
EE+CH+SP	\$1500	\$1800	\$3000	\$4000							

SHBP Plan Changes January 1, 2010

All Retirees

HMO Plan Changes												
Coverage	Deductible From To		Out of Pocket Max. From To		Coinsurance From To		Office Visit Copay From To		ER Room From To		Prescription Drugs From To	
Retiree	\$400	\$ 600	\$1500	\$2000	10%	20%	\$30	\$35	\$100	\$150	\$10/30/75	\$15/40/75 (3 co-pays for 90-day supply)
Family	\$800	\$1200	\$3000	\$4000								

OAP Plan Changes (previously called the PPO option)												
Coverage	Deductible From To		Out of Pocket Max From To		Coinsurance From To		Office Visit Copay From To		ER Room From To		Prescription Drugs From To	
Retiree	\$ 500	\$ 600	\$1500	\$2000	10%	20%	\$30	\$35	\$100	\$150	\$10/30/100	\$15/40/100
Family	\$1500	\$1800	\$3000	\$4000								

SHBP Plan Changes January 1, 2010

Active Employees

HRA Plan Changes				
Coverage	Deductible*		Out of Pocket Maximum*	
	From	To	From	To
EE	\$1000	\$1100	\$2000	\$2500
EE + CH	\$1750	\$1900	\$3250	\$4100
EE + SP	\$1750	\$1900	\$3250	\$4100
EE+CH+SP	\$2500	\$2750	\$4500	\$5700

* Note: The deductibles and out-of-pocket maximum will be reduced by the HRA dollar credits.

HDHP Plan Changes								
Coverage	Deductible IN		Deductible ON		Out of Pocket Max IN		Out of Pocket Max ON	
	From	To	From	To	From	To	From	To
EE	\$1150	\$1200	\$2300	\$2400	\$1700	\$1800	\$3800	\$4000
EE + CH	\$2300	\$2400	\$4600	\$4800	\$2900	\$3100	\$7000	\$7400
EE + SP	\$2300	\$2400	\$4600	\$4800	\$2900	\$3100	\$7000	\$7400
EE+CH+SP	\$2300	\$2400	\$4600	\$4800	\$2900	\$3100	\$7000	\$7400

SHBP Plan Changes January 1, 2010

All Retirees

HRA Plan Changes				
Coverage	Deductible*		Out of Pocket Maximum*	
	From	To	From	To
Retiree	\$1000	\$1100	\$2000	\$2500
Family	\$2500	\$2750	\$4500	\$5700

** Note: The deductibles and out-of-pocket maximum will be reduced by the HRA dollar credits.*

HDHP Plan Changes								
Coverage	Deductible IN		Deductible ON		Out of Pocket Max IN		Out of Pocket Max ON	
	From	To	From	To	From	To	From	To
Retiree	\$1150	\$1200	\$2300	\$2400	\$1700	\$1800	\$3800	\$4000
Family	\$2300	\$2400	\$4600	\$4800	\$2900	\$3100	\$7000	\$7400

SHBP Plan Changes January 1, 2010

Active Employees and All Retirees

Other Plan Changes

- OAP/HMO Office Co-pays – from \$30 to \$35
- HRA out of network pharmacy changed from 15% generic and 25% brand to 40%



SHBP Plan Changes January 1, 2010

- The PPO options going forward will be referred to as the Open Access Plans (OAP). These plans will access CIGNA's and UHC's OAP networks (referred to as "Open Access Plus" by CIGNA and Choice Plus by UHC)
- The CIGNA option for SHBP members has been the Open Access product and is not changing
- Benefits are the same as under a PPO and provide in-network and out-of-network benefits

SHBP Plan Changes January 1, 2010

- The SHBP coordination of benefits (COB) policy will change for the OAP and HRA options to a non-duplication of benefits for COB (all other SHBP options already have this provision)
- **What does this mean?** It means that if you are covered by two group health plans, the benefit under SHBP will be no greater than it would have been if there was no coverage other than that of SHBP.



SHBP Plan Changes January 1, 2010

Example of Non-duplication of benefits:

	<u>2009</u>	<u>2010</u>
Hospital bill for MRI	\$2,939.80	\$2,939.80
Primary Carrier** Allows	\$ 544.27	\$ 544.27
Primary** Pays	\$ 435.42	\$ 435.42
Member liability	\$ 108.85*	\$ 108.85*
SHBP allows	\$ 544.27	\$ 544.27
SHBP applies coinsurance.	\$ 00.00*	\$ 81.64*
SHBP pays	\$ 108.85	\$ 27.21

* Member responsibility/co-insurance

** Other insurance or Medicare



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SHBP Plan Option

Health Reimbursement Arrangement (HRA)

- The HRA plan is a consumer driven health plan that is very similar to a PPO, which provides benefits for using in or out-of-network providers
- This plan also gives members control over how their health care dollars are spent
- SHBP contributes dollars to the HRA account which provide coverage for first dollar expenses and helps to reduce deductibles and out-of-pocket expenses



SHBP Plan Option

SHBP Contributions to the HRA

Health Reimbursement Arrangement (HRA)

Tier	HRA Credits
Employee	\$ 500
Employee + Spouse	\$ 1,000
Employee + Child(ren)	\$ 1,000
Family	\$ 1,500

Additional dollar credits of \$125 each (for a total of \$250) can be earned if a husband and wife each take a health assessment and receive their annual physical. Note: Retirees earn \$500 for single and \$1,500 for family coverage.

SHBP Plan Option

Features of the HRA Plan

- Low employee premiums
- SHBP credits dollars each year that pay for covered initial charges, whether medical or pharmacy expenses. These dollars also reduce your deductible and maximum out-of-pocket expenses
- You do not pay co-pays under this plan but co-insurance whether it is for your prescription drugs, office visits or surgery
- Any dollars not used at the end of the year roll over to the next year
- 100 percent coverage for preventive care when using a in-network provider and the cost of these services do not come out of your HRA dollars



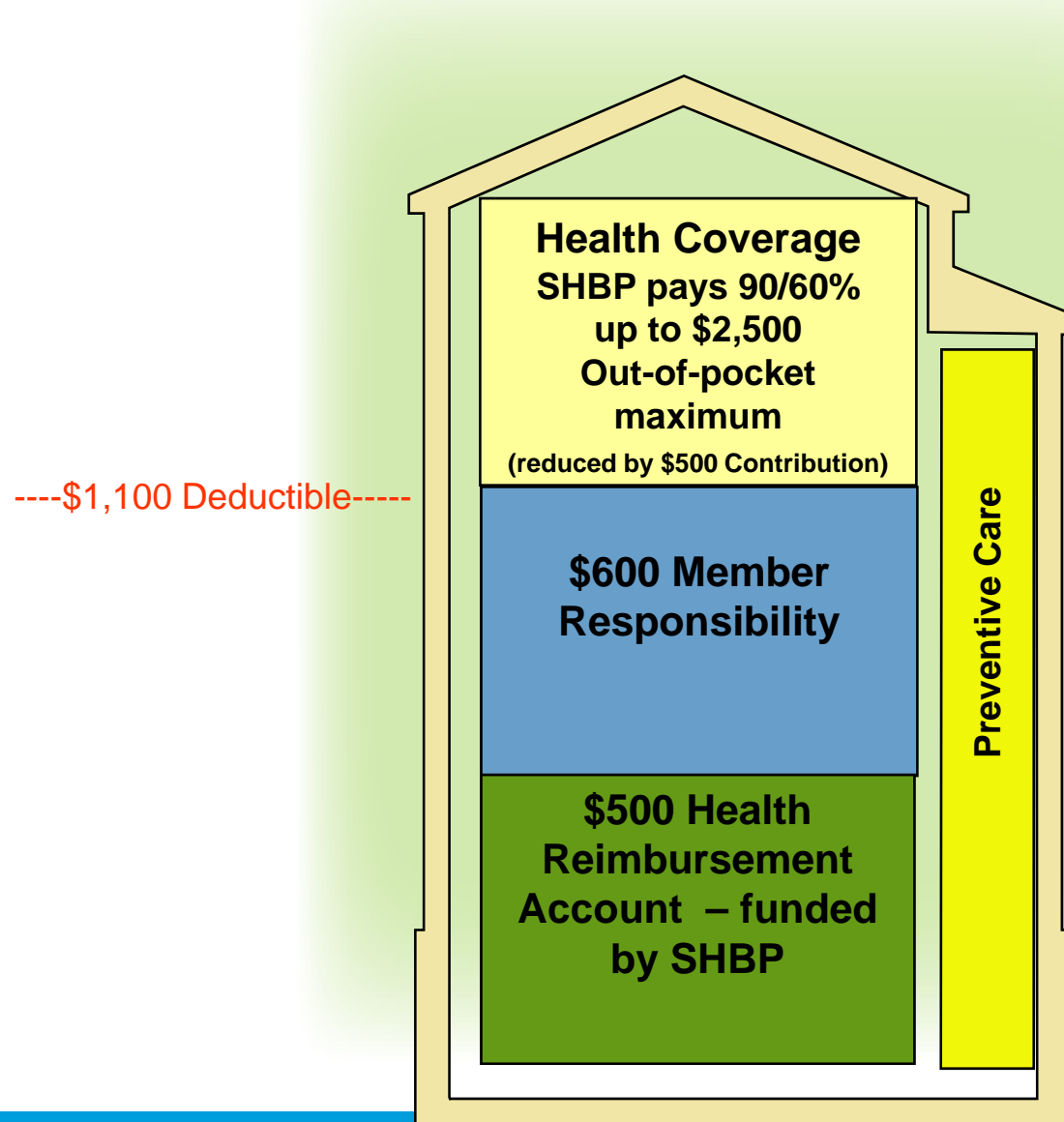
SHBP Plan Option

Features of the HRA Plan

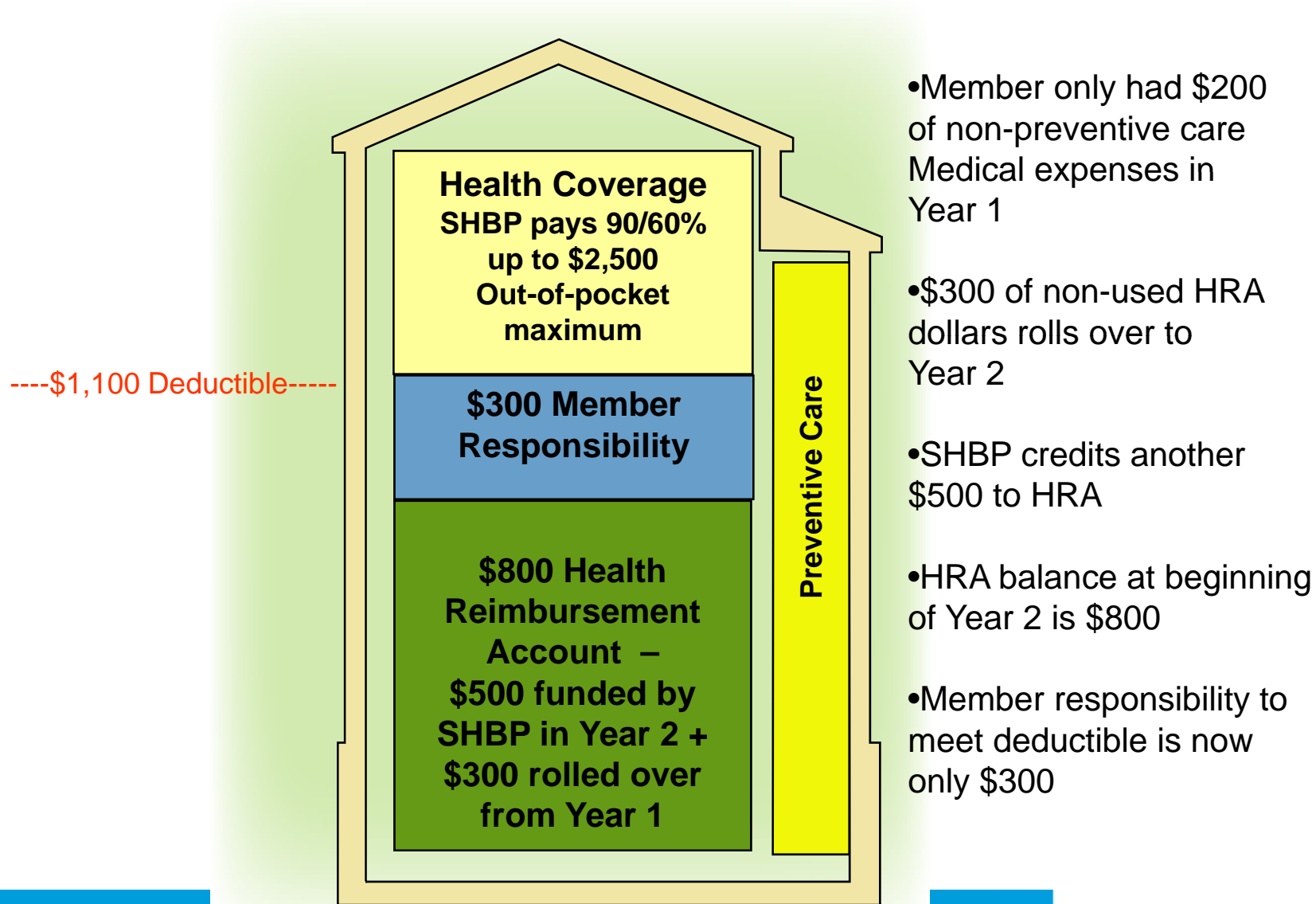
- No primary care physician (PCP) designation or specialist referrals required although we do suggest that you designate a PCP
- No cost for certain asthma, diabetes and cardiac drugs for members enrolled and compliant with the disease management program are waived
- The employee and spouse can also each earn \$125 (total of \$250) by completing a health assessment and getting their annual physicals



How an HRA Works – Single Coverage



How an HRA Works – Year Two



If You Are Retiring before the end of the Year and are Medicare Eligible

Your options will be:

- One of the Medicare Advantage with prescription drug coverage (MAPD) Private Fee for Service (PFFS), if you want to continue to receive the state contribution toward the cost of your health insurance (must have Medicare Part B coverage)
- You may still choose one of the other SHBP options, but you will pay 100 percent of the cost for the coverage

Open Enrollment/Retiree Option Change Period

October 9 – November 10, 2009

- Employees/retirees will make their health benefit election at www.oe2010.ga.gov
- Web site will be open at 4 a.m. on October 9 and close at 4:30 p.m. on November 10, 2009
- The **Health Plan Decision Guides** will be distributed to each agency and will be available at www.oe2010.ga.gov and www.dch.ga.gov/shbp_plans and will be mailed to retirees' homes



Open Enrollment

October 9 – November 10, 2009

Active Members

- You will make your coverage tier election based on the dependents you wish to cover:
 - EE = employee only
 - ES = employee+ spouse
 - EC = employee+ child(ren)
 - EF = employee + spouse + child(ren)

*If you do not make a tier selection during OE, you and any active eligible dependents will roll over to your current tier. You will be "locked in" to that coverage tier for 2010



Open Enrollment

October 9 – November 10, 2009

Active Members

- If you do not go online during OE, make a benefit selection and answer the tobacco and spousal surcharge questions, you will roll over to your current tier under the same option you currently have (if offered) and the tobacco and spousal (if your spouse is covered) surcharges will be applied. You will be “locked in” to the tier and option for the entire 2010 Plan year unless you experience a qualifying event



Open Enrollment

October 9 – November 10, 2009

- If you are covered by Kaiser and do not go online during OE and make an election and answer the tobacco and spousal surcharge questions, your coverage will roll over to the CIGNA HRA Option and the tobacco and spousal surcharges (if your spouse is covered) will apply. You will be “locked in” to the tier and option for the entire 2010 Plan year unless you experience a qualifying event that allows you to make a change



SHBP Open Enrollment

Informed Enrollment

- To assist our members in making an informed election for their 2010 health benefits, SHBP active members and pre-65 retirees will be able to view information from Thomson Reuters, who manages the SHBP data, when they access the OE Web site, www.oe2010.ga.gov to make their online 2010 benefit election.
- The information compares your 2008 medical and prescription claims cost against the 2010 plan options and premium structure
- The analysis letter will show which SHBP option in 2010 is expected to have the lowest cost based on the 2008 claims experience



Open Enrollment/Retiree Option Change Period

October 9 – November 10, 2009

Before making your selection:

- Carefully read the **Decision Guide**
- Confirm your option will be offered in 2010
- Compare the benefits and premiums for each option
- See if your providers are participating in the network for the vendor and option you are considering selecting
- Check the distance you will have to drive to see your providers
- Check the coverage for prescription drugs – review the Preferred Drug List, co-insurance, co-pay



Open Enrollment/Retiree Option Change Period

October 9 – November 10, 2009

Remember:

- Log on to the www.oe2010.ga.gov between October 9 and November 10, 2009 and make your plan option selection
- Answer the surcharge questions (active)
- Verify the option and tier are correct
- Verify that all the dependents you want covered are listed by checking “yes” beside the name of each dependent



Open Enrollment/Retiree Option Change Period October 9 – November 10, 2009

- Employees should print the confirmation notice or write down their confirmation number
- Verify that all information is correct and keep a copy of the confirmation number for your records
- The confirmation notice with the latest date and time at the close of OE confirms benefit elections for the 2010 Plan Year



Open Enrollment/Retiree Option Change Period

October 9 – November 10, 2009

If you have questions about a specific plan,
you may reach each vendor at:

CIGNA www.CIGNA.com/shbp

➤ 800-633-8519

UnitedHealthcare www.welcometouhc.com/shbp

➤ HRA: 800-396-6515

➤ OAP, HMO, HDHP: 877-246-4189

Kaiser Important Facts

Medical Records

Your medical records can be mailed to you or may be picked up. Make your request on the ROI form available online at www.dch.georgia.gov/shbp or by calling Kaiser at the number shown below. If members chose to pick up their medical records, a Kaiser representative will contact the member when their medical records are ready for pick-up.

Prepared records can be picked up at the following locations only:

- **Southwood Medical Center** (2400 Mt. Zion Parkway, Jonesboro, Georgia 30236)
Tuesday–Friday, 1 p.m. – 7 p.m. and Saturday, 9 a.m. – 1 p.m.
- **Crescent Medical Center** (200 Crescent Centre Parkway, Atlanta, Georgia 30084)
Monday–Friday, 1 p.m. – 7 p.m.
- **Dekalb Tech HIMS** (4000 DeKalb Technology Parkway – Suite 200, Atlanta, Georgia 30340)
Monday–Friday, 9 a.m. – 5 p.m. and Saturday 9 a.m. – 1 p.m.

Contact Kaiser at (770) 496-3860 if you have questions

Kaiser Important Facts

Fees for Medical Records

Kaiser Fees vary based on the amount of information requested and whether members would like paper or electronic copies; however, *there is not a fee if a member elects to have their medical records sent electronically to their new physician.*

Medical Records Pricing Guide:

- **3 Years of Information**, Progress notes, lab results, radiology reports, ekg, referrals, hospital as available
Thumb Drive \$ 25.00, CD \$ 21.00, Paper \$ 45.00, Direct to New Physician (electronic only) FREE *
- **3+ years information**, Progress notes, lab results, radiology reports, ekg, referrals, hospital as available
Thumb drive \$ 53.00, CD \$ 45.00, Paper \$ 87.00
- **Radiology Images** , DVD per image \$ 2.00, Film per image \$ 5.00
- * *3 years of clinically pertinent information will be provided or what is specifically requested by your new physician's office.*
- Prepayment for all services are due prior to release of information per OCGA §31-33-3
(Note: This information was provided from Kaiser.)



Thank You



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